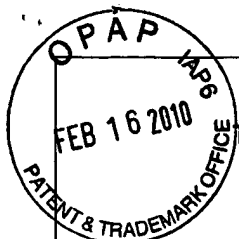


02-18-10

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TRANSMITTAL  
FORM

Application Number	10/573,279
Filing Date	January 9, 2007
First Named Inventor	Takayuki Kondo
Art Unit	2618
Examiner Name	Eugene Yun
Attorney Docket Number	200380-9054

Total Number of Pages in This Submission 9

## ENCLOSURES (check all that apply)

- ☒ Amendment/Reply
- ☒ Before Final – 8 pages
- ☐ After Final
- ☐ Affidavits/Declarations
- ☐ Information Disclosure Statement
- ☐ PTO-1449 Form(s)
- ☐ Cited References
- ☐ Certified Copy of Priority Document
- ☐ Response to Missing Parts/Incomplete Application
- ☐ Terminal Disclaimer
- ☐ Submission of Formal Drawings
- ☐ Other:

## PETITION FOR EXTENSION OF TIME

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

- ☐ Applicant(s) claims small entity status under 37 CFR 1.27.
- ☐ Applicant(s) petitions for a two-month extension of time and pay the fee of \$490.00 (37 CFR 1.17(a)(1)-(5)).
- ☒ Applicant(s) believes that no petition for an extension of time is necessary (37 CFR 1.36(c)); however, applicant(s) hereby petition for sufficient extension of time to render the present submission timely.

## CLAIMS FEES

- ☒ No additional claim fee is required.

				Small Entity		Large Entity	
	Claims Remaining After Amendment	Highest Number Previously Paid For	Extra Claims Present	Rate	Addit. Claim Fee	Rate	Addit. Claim Fee
Total	-	20	=0	x 25=	\$0	x 50=	\$0
Independent	-	3	=0	x 100=	\$0	x 200=	\$0
<input type="checkbox"/> First Presentation of Multiple Claim				+ 180=	\$0	+ 360=	\$0

## FEES

- |  |               |
|--|---------------|
| <input type="checkbox"/> Additional Claim Fee                      | \$0.00        |
| <input type="checkbox"/> Extension fee for two-month               | \$0.00        |
| <input type="checkbox"/> Information Disclosure Statement          | \$0.00        |
| <input type="checkbox"/> Surcharge for Missing Parts – Declaration | \$0.00        |
| <input type="checkbox"/> Terminal Disclaimer                       | \$0.00        |
| <b>TOTAL FEES</b>  | <b>\$0.00</b> |

## PAYMENT OF FEES

- ☐ A check in the amount of \$ 0.00 is enclosed.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1965.
- ☐ Payment by credit card. Form PTO-2038 is attached.

## SIGNATURE OF ATTORNEY

Thomas J. Keating, Reg. No. 59,110  
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 180 North Stetson Avenue  
 Suite 2000  
 Chicago, IL 60601-6710  
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/thomas j. keating/

Signature

Date: February 16, 2010

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is:

- ☐ being facsimile transmitted to the USPTO, facsimile number (571) 273-8300.
- ☒ deposited with the U.S. Postal Service with sufficient postage as Express Mail No. EV 840171040 US in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below

Typed or printed name

Elizabeth M. Campbell Tressler

Signature

Date: February 16, 2010